

CLAIMS ONLY

Application Number

101692917

Filing Date

Applicant(s)

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments					
	Indep	Depend	Indep	Depend	Indep	Depend						
1			/				51					
2				/			52					
3				/			53					
4				/			54					
5				/			55					
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45				/			95					
46				/			96					
47				/			97					
48				/			98					
49				/			99					
50				/			100					
Total Indep							Total Indep					
Total Depend							Total Depend					
Total Claims							Total Claims					

1
25
26